## FILE NOW: FILING FEE AFTER WAY 151 15 \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000041132

1. Corporation Name

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90104 006 \*\*\*150.00

XYZ LAV	<i>N</i> N SERV., INC.							
							    85884   881   83	
Principal Plac	e of Business	Mailing Address			·			
9610 SW 163 STREET 9610 SW 163 STREET								
MIAMI FL 33157-3320 MIAMI FL 33157-3320						DO NOT WRITE IN TH	S SPACE	
						3. Date Incorporated or Qualifed		
						05/06/1998		
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	A	pplied For
21 26						65-0838046		ot Applicable
		Suite, Apt. #, etc.	etc.			5. Certifcate of Status Desired		Additional equired
City & State		City & State				6: Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Coun	itry		8. This corporation owes the current year I	ntangióle	<del></del>
24	25	29	30			Personal Property Tax.	Yes Yes	□No
	9. Name and Address of Curre	ent Registered Agent		04 I .		10. Name and Address of New Registere	d Agent	
CAS	MACHO, ARMANDO JR			81	Name			
	0 SW 163 STREET		Ţ	82 3	Street Addre	ess (P.O. Box Number is Not Acceptable)		1
	MI FL 33157-3320			83				
,			L					
				84 (	City	F	85	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the ab	ove-n	amed corpo	oration submits this statement for the purpose n's board of directors. I hereby accept the app		s registered
office or r	registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida, Such change was au nations of, Section 607,0505, Flori	ithorized ida Statu	by the	e corporatio	n's board of directors. I hereby accept the app	ointment as r	egistered
	armando Camach	D. ARMANDO CA			TR	· 2·	12-55	
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE:	Registered A	Agent si	gnature required	when reinstating) DATE		
12.	<del></del>	ND DIRECTORS	13.		1	ADDITIONS/CHANGES TO OFFICERS	ND DIRECT	ORS IN 12
TITLE	PD ARMANDO	☐ DÉLETE	1.1 TITL				Change	L Addition
NAME	CAMACHO, ARMANDO 9610 SW 163 STREET		1.2 NAM	ALE REET AC	NOBECC			
STREET ADDRESS	MIAMI FL 33157-3320		i	Y-ST-Z				
CITY-ST-ZIP TITLE	MIMMI FL 33131-3320	DELETE	2.1 TITL		<u> </u>		Change	Addition
NAME			2.2 NA	ΛE				
STREET ADDRESS	;		2.3 STF	REETAD	ORESS			1
CITY-ST-ZIP			2. 4 CIT	Y-ST-Z	ZIP			
TITLE		☐ DELETE	3.1 TIT	E			Change	☐ Addition {
NAME			3.2 NAM	νE		~		(
STREET ADDRESS			3.3 STR	REETAD	DRESS			
CITY-ST-ZIP			3.4. CIT		ZIP		Change	Addition
TITLE	į	□ DELETE	4.1 TITU				change	Addition
NAME								
STREET ADDRESS			4. 2 NA					
			4.3 STF	REET AL	DDRESS			
CITY-ST-ZIP		∏ nei ete	4.3 STR 4.4 CIT	REET AD Y-ST-Z			Change	Addition
TITLE		☐ DELETE	4.3 STF	REET AD Y-ST-Z LE			Change	☐ Addition
TITLE NAME		☐ DELETE	4.3 STF 4.4 CIT 5.1 TITL	REETAL Y-ST-Z LE ME	je		Change	Addition
TITLE NAME STREET ADDRESS		☐ DELETE	4.3 STF 4.4 CIT 5.1 TITL 5.2 NAM	REET AL Y-ST-Z LE ME REET AL	DDRESS		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.3 STF 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STF	REET AL Y-ST-Z LE ME REET AL Y-ST-Z	DDRESS	-	☐ Change	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			4.3 STF 4.4 CIT 5.1 TITI 5.2 NAM 5.3 STF 5.4 CIT	REET AD Y-ST-Z LE ME REET AD Y-ST-Z LE	DDRESS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.3 STF 4.4 CIT 5.1 TITU 5.2 NAM 5.3 STF 5.4 CIT 6.1 TITU	REET AD Y-ST-Z E ME REET AD Y-ST-Z LE	DDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

AMACHO JR 2-12-59-(305)232-1586 SIGNATURE: aman